FORM D

UNITED

OMB APPROVAL OMB Number:

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 FORM D

Expires: RECEIVED

GA

Estimated average burden

hours per response:.



NOTICE OF SALE OF SECURATIES 1 4 2002 PURSUANT TO REGULATION D SECTION 4(6), AND OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Serial DATE RECEIVED

02065498

Name of Offering: (check if this is an amend	lment and name has	s changed, and inc	licate change.)	-	
Broadsource, Inc. Offering of Series B Conve	rtible Preferred St	ock			
Filing Under (Check box(es) that apply):	Rule 504	Rule 505		Section 4(6)	ULOE
Type of Filing: New Filing	ndment				
	A. BASIC I	DENTIFICATION	N DATA		
1. Enter the information requested about the i	ssuer				
Name of the Issuer (check if this is an amend	dment and name ha	s changed, and in	licate change.)		
Broadsource, Inc.			-		
Address of Executive Offices	(Number an	d Street, City, Sta	te, Zip Code)	Telephone Number (1	ncluding Area Code)
1900 Emery Street, Suite 102, Atlanta, Georg	ia 30318			404-325-9234	-
Address of Principal Business Operations	(Number an	d Street, City, Sta	te, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) Same			-	Same	
Brief Description of Business					PROCESSE
					I COMPOSE!
Online telecommunications services.					
					140 A 3 \$100\$
Type of Business Organization					THOMSON
□ corporation	limited partn	ership, already for	med	other (please spec	cify): limitanicial
business trust	limited partn	ership, to be form	ed	company, already for	med
		Month	Year		
Actual or Estimated Date of Incorporation or Or	ganization:			Actual	ted
Jurisdiction of Incorporation or Organization: (•			_	•

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 772(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed on later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sale of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA							
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; 							
• Each beneficial owner of the issuer;	naving the power	to vote or dispose, or direct	the vote or disposition of	, 10% or more of a	a class of equity securities		
-		orporate issuers and of corporate issuers and of corporations.	orate general and managing	g partners of partn	ership issuers; and		
Check Box(es) that Apply:							
Full Name (Last name first, if inc Bird D. Blitch	lividual)						
Business or Residence Address 1900 Emery Street, Suite 102, A		treet, City, State, Zip Code) 30318					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, if ind John Andrew Monin	lividual)						
Business or Residence Address 1900 Emery Street, Suite 102, A		treet, City, State, Zip Code) 30318					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner		
Full Name (Last name first, if inc James Daniel Blitch, III	dividual)						
Business or Residence Address 1900 Emery Street, Suite 102,		treet, City, State, Zip Code) 30318					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if inc	dividual)	,					
Business or Residence Address	(Number and S	treet, City, State, Zip Code)		-			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, if inc	lividual)		****				
Business or Residence Address	(Number and S	treet, City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if individual)							
Business or Residence Address	(Number and S	treet, City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, if individual)							
Business or Residence Address	(Number and S	treet, City, State, Zip Code)					
	(Use blank she	et, or copy and use addition	al copies of this sheet, as r	necessary.)			

7979	B. INFORMATION ABOUT OFFERING						
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						
2.	2. What is the minimum investment that will be accepted from any individual?						
3.	Does the offering permit joint ownership of a single unit?	Yes ⊠	No				
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) person to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.						
Full	Name (last name first, if individual)						
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)		****				
Nan	ne of Associated Broker or Dealer						
Stat	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
	(Check "All States" or check individual States)		States				
[] [N	L] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]				
	Name (last name first, if individual)	<u></u>					
_							
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)						
Nar	ne of Associated Broker or Dealer						
Stat	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
	(Check "All States" or check individual States)	☐ All	States				
[] [N	IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]				
Full Name (last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
2.5 Control of Treatment (Trainer, and Street, City, State, 2.5 Code)							
Name of Associated Broker or Dealer							
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
(Check "All States" or check individual States)							
	AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	[HI] [MS]	[ID] [MO]				
[N		[OR] [WY]	[PA] [PR]				

(Use blank sheet, or copy and use additional copies of this sheet as necessary.)

	C. OFFERING PRICE, NUMBER OF INVENTORS, EXPENSES AND USE OF	PROCEEDS	n delek a sasar a 1947 - 1 n masa kak S. Willebattan da a
1.	Enter the aggregate offering price of securities in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check		
	this box ∞ and indicate in the columns below the amount of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$2,000,000	\$150,000
	☐ Common ☒ Preferred	\$	\$
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$2,000,000	\$150,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amounts of their purchased on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2	\$150,000
	Non-accredited Investors	0	0
	Total	2	\$150,000
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of Security	Dollar Amount Sold
	Type of offering		\$
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$0
	Legal Fees	🖾	\$15,000
	Accounting Fees		\$0
	Engineering Fees		\$0
	Sales Commissions (specify finders' fees separately)		\$0
	Other Expenses (identify) State Blue Sky Filing Fees		\$250
	Total	🖂	\$15,250

	C. OFFERING PRIC	E, NUMBER OF INVENTORS, EXPENSES	SAND	USE	OF PROCEEDS		
	Question 1 and total expenses furnished	gregate offering price given in response in response to Part C - question 4.a. This uer."	differe	ence		<u>\$1</u>	1 <u>,984,750</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnis an estimate and check the box to the left of the estimate. The total of the payments liste must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Questio 4.b above.							
	4.5 above.				Payments to Officers, Directors, & Affiliates		Payments To Other
	Salaries and fees				\$		\$
	Purchase of real estate				\$		\$
	Purchase, rental or leasing and installation of	f machinery and equipment	•••••		\$		\$
	Construction or leasing of plant building and	facilities			\$		\$
	may be used in exchange for the assets or sec	value of securities involved in this offering that curities of another issuer pursuant to a			\$		\$
	<u> </u>				\$		\$
	Working capital				\$	\boxtimes	\$1,984,750
	Other (specify):				\$		\$
					\$		\$
					\$	\boxtimes	\$1,984,750
	Total Payments Listed (column totals added)				\boxtimes	\$1,984	4,750
		D. FEDERAL SIGNATURE		ini Hijiye Y		Maria da y Maria	e sa se silas ballada en
sign	e issuer has duly caused this notice to be signed nature constitutes an undertaking by the issuer ormation furnished by the issuer to any non-acc	to furnish to the U.S. Securities and Exchange	Comm	issior			
Issu	uer (Print or Type)	Signature	D	ate			
Bro	oadsource, Inc.	Birl D. Blats	N	ovem	ber 12, 2002		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)					
Bir	rd D. Blitch	President					
		ATTENTION					
	Intentional misstatements or omis	ssions of fact constitute federal crim	inal v	iolat	tions. (See 18 U	J .S.C	C. 1001).

	·····································					
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?					
	See Appendix, Column 5, for state response.					
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D 917 CFR 239,500) at such times as required by state law.					
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.					
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.					
	The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.					
Issuer (Print or Type)		Signature	Date			
Broadsource, Inc.		Birl D Buth November 12, 2002				
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
Bir	Bird D. Blitch President					

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.